

# **Partnership for Health: A Brief Safer-Sex Intervention in HIV Clinics**



## **The Research**

### **The Science Behind the Package**

Partnership for Health (PfH) is a brief, provider-delivered, counseling program for individual men and women living with HIV/AIDS. The program is designed to improve patient-provider communication about safer sex, disclosure of serostatus, and HIV prevention. PfH is based on a social cognitive model that uses message framing, repetition and reinforcement to increase the patient's knowledge, skills, and motivations to practice safer sex.

### **Target Population**

HIV-positive men and women

### **Intervention**

At clinics providing primary medical care to HIV-positive persons, patients are given an informational flyer (in English or Spanish) at the front desk. Posters calling attention to the power of patient-provider teamwork are displayed in the waiting room. After the physical exam, the medical provider conducts the 3- to 5-minute counseling session. The provider delivers messages that focus on self-protection, partner protection, and disclosure. The provider frames the messages relative to the number and type of sex partners the patient has and whether the patient is practicing safe or unsafe sex. Consequences-framed messages emphasize a positive outcome that may be missed or a negative result that may occur when the patient engages in unsafe sexual behaviors or does not disclose their serostatus to their partners. Advantages-framed messages focus on a positive outcome that may happen or a negative result that may be avoided when the patient engages in safe sexual behaviors or discloses their serostatus to partners. The provider uses the brochures, informational flyers and posters in the examination room to facilitate counseling. The provider and patient identify behavioral goals for the patient to work on. The provider gives the patient referrals to services if any are needed. At follow-up visits, the provider inquires about the patient's progress on the behavioral goal, re-counsels the patient, and reinforces the patient's healthful behavior.

### **Research Results**

Patients who had 2 or more sex partners or at least 1 casual partner and who received consequences-framed messages were:

- Significantly less likely to engage in unprotected anal or vaginal sex

### **For Details on the Research Design**

Richardson J.L., Milam J., McCutchan A., Stoyanoff S., Bolan R., Weiss J., Kemper C., Larsen R.A., Hollander H., Weismuller P., Chou C.P., and Marks G. Effect of brief safer-sex counseling by medical providers to HIV-1 seropositive patients: A multi-clinic assessment. *AIDS* 2004;18:1179-1186.

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## The Intervention

### A Package Developed from Science

Replicating Effective Programs (REP) is a CDC-initiated project that identifies HIV/AIDS prevention interventions with demonstrated evidence of effectiveness. REP supports the original researchers in developing a user-friendly package of materials designed for prevention providers. PfH is one of the REP interventions and is the product of extensive collaboration among researchers who originally developed and evaluated the intervention and the clinics and providers who implemented the intervention as well as patient focus groups. The package has been field tested in five clinics and one HIV prevention agency by non-research staff.

### Core Elements

*Core elements* are intervention components that must be maintained without alteration to ensure program effectiveness. The core elements of Partnership for Health include:

- Having providers deliver the intervention to HIV-positive patients in HIV outpatient clinics.
- Having the clinic adopt prevention as an essential component of patient care.
- Training of all clinic staff to facilitate integration of the prevention counseling intervention into standard practice.
- Using waiting room posters and brochures to reinforce prevention messages delivered by the provider.
- Building on the ongoing supportive relationship between the patient and the provider.
- During routine visits, having the provider initiate at least a 3- to 5-minute discussion with the patient or client about safer sex that focuses on self-protection, partner protection, and disclosure.
- Having the provider incorporate good communication techniques and use of consequences-framed messages for patients or clients engaged in high risk sexual behavior.
- Providing referrals for needs that require more extensive counseling and services.
- Integrating the prevention message into clinic visits so that every patient is counseled at every visit.

### Package Contents

- A manual to guide clinics through planning, implementation, and maintenance of the intervention.
- Sample brochures, chart stickers, pocket counseling outline, posters, and flyers.
- A manual for each provider and a training video for each clinic

### Intervention Orientation

All clinic staff attend a 4½- hour training and a 1-hour booster session in which they learn how to conduct the intervention, practice intervention delivery skills, and identify agency-specific implementation strategies.

### Technical Assistance

Capacity-building assistance providers problem-solve with adopting agencies to achieve an effective balance between maintaining core elements and tailoring to local needs. Assistance providers address implementation concerns, answer questions, and provide advice.

### Timeline for Availability

The package will be available from CDC along with training on program implementation and technical assistance in the future. The package materials can be downloaded from [www.usc.edu/partnershipforhealth](http://www.usc.edu/partnershipforhealth).

### For More Information on the Partnership for Health Package

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